2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 441155

City-St-Zip:

BOCA RATON, FL 33496

Entity Name: TRU-GEMS, INC.

FILED Mar 14, 2008 Secretary of State

Littly Na	ille. TRO-GEI	VIO, IINO.			
Current P	rincipal Place	of Business:	New Principal Place of	New Principal Place of Business:	
5030 CHAMPION BLVD F 7A					
F7A BOCA RATON, FL 33496					
	•		Navy Mailing Address		
Current Mailing Address:			New Mailing Address	New Maining Address.	
5030 CHAMPION BLVD F 7A F7A					
	TON, FL 3349	6			
FEI Number: 59-1500426		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
STEPHEN M. GOLDING CO., LTD. 2950 WEST CYPRESS CREEK ROAD			2801 N. UNIVERSITY [STEPHEN M. GOLDING CO., LTD. 2801 N. UNIVERSITY DRIVE	
#102 FT. LAUDERDALE, FL 33309 US			#301 CORAL SPRINGS, FL	CORAL SPRINGS, FL 33065 US	
The above in the State	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				03/14/2008	
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ST (KRUTA, LINDA 5030 CHAMPIO BOCA RATON,	ON BLVD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP (KRUTA, SHERI 5030 CHAMPIC BOCA RATON,	ON BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	P () KRUTA, ROBE		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ROBERTA M. KRUTA P 03/14/2008